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| **North of Tyne** **UK Shared Prosperity Fund** |
| **People and Skills****Delivery of employment support to out-of-work residents including intensive wrap-around support (April 2023 to March 2025)****Project Application Form**  |
| **Project Name** |  |
| **Call Reference** **Number under which submission is made** |  |

**Project Gateway / eligibility criteria**

Please see Section 7 of the Guidance document for further information about how to complete this section of the application form.

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| **Lead Organisation** |  |
| **Registered Address** |  |
| **Type of Organisation** | Choose an item. |
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| **Charity Registration No. of lead organisation (if applicable):** |  |
| **Contact Person at lead organisation:** |  |
| **Position within the Organisation:** |  |
| **Contact Address (if different from above)** |  |
| **Telephone No:** |  |
| **Mobile No:** |  |
| **Email Address:** |  |
| **Geographic area of delivery:** |  |
| **Start date for the project:** |  |
| **End date for the project** |  |
| **Delivery partners: Please list all organisations that will deliver activity as part of this project, using the table below:** |
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| **Delivery partner** | **Type of organisation** |
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| **What is the name of the most recent ESF employability project you have delivered?**  |  |
| **ESF Project Reference number(s)** |  |
| **Were you the lead partner or a delivery partner?** |  |
| **What is / was the end date of the project?** |  |
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| **How much UKSPF funding are you requesting for your project?** |  |
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| **Do you currently work with / engage with one or more of the North of Tyne Employment Partnerships? If yes, please specify which partnership(s)?** |  |
| **If yes, please explain how you currently work with local Employment Partnership structures.** |  |
| **Please confirm that you will work with / engage with the relevant Employment Partnership/s throughout delivery of the proposed project:** |  |

Please note: Applicants that do not meet the Gateway / eligibility criteria will not progress to the next stage of the application assessment process.

1. **Project costs**

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| **Project funding** | **£** |
| Total project cost:  |  |
| Amount of UKSPF grant funding requested: |  |
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| **Match Funding:** Please specify the source, status, and amount of any match funding for the project (add more rows as required) | **£** | **Status** |
| Match funding (source 1) |  |  |
| Match funding (source 2) |  |  |
| **Total match funding:**  |  |  |

**Please provide confirmation evidence for all match funding in support of this section.**

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| **Budget and expenditure:** Please confirm Annex A Finance Template has been fully completed with quarterly forecasts of budget and expenditure for the duration of project delivery. | [ ]  |

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| **Basis for expenditure profile:** On what basis have the cost estimates been made including inflation/cost of living rise. Where applicable, compare costs with other similar current project costs. Please provide evidence of costing assumptions where available, e.g. quotations or previous budget costs. |
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| Where the project includes salary costs, can you confirm that these will be delivered in line with the NTCA Funding Guidance. | Choose an item. |
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| **VAT: Does the project include non-recoverable VAT?**If yes, please explain why VAT cannot be recovered and what actions have been taken to minimise VAT liability and provide supporting evidence. | Choose an item. |
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1. **Quality Questions**

**Question 1: Project Plan**

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| **1A: Project Name** |  |
| **1B: Project Description**Your answer here will help us understand the nature of the project. Please provide a detailed description of what the project will do, how it will be delivered, and how it addresses the requirements of the call. Specifically, provide a response that covers each of the following headings:* What the project is, including the specific activities to be delivered
* Who will deliver the project? Please specify roles and activities to be delivered by each delivery partner (e.g., end-to-end support; life skills; specialist support for people with mental health issues)
* Who will benefit from the project?
* What the benefits of the project will be / what difference the project will make
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| **1C: Alignment with existing provision**Please explain:* How you will work with the relevant Employment Partnership’s throughout project delivery.
* How the project will be aligned to / add value to other employability / employment support projects currently in delivery, particularly those operating in rural areas
* How you propose to engage with local partnership infrastructure e.g., the Community Partnerships once they are operational
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| **1D: Complementarity and displacement**Please explain how the proposal set out in this application is distinct from, and will add value to existing provision and services* For example, will the proposal set out in this application meet a demand that is not currently being satisfied, or continue delivery of a current project which is meeting demand

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| **Question 1E: Project milestones:** Please complete the table below with the **key** milestones and target achievement date for the project. |
| **Milestone** | **Date** |
| **Start Date** |  |
| **Max 10 key other milestones** (please specify) |
| **1)** |  |
| **2)** |  |
| **3)** |  |
| **4)** |  |
| **5)** |  |
| **6)** |  |
| **7)** |  |
| **8)** |  |
| **9)** |  |
| **10)** |  |
| **Financial Completion date** |  |
| Date by which all outputs and outcomes will be achieved |  |

**Question 2: Target Participants and Outputs**

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| **2A: Please describe the target participants for your project, and how you will engage them onto the project. Please include details of:*** Each target group e.g., economically inactive residents aged 50+; with a mental health issue
* How you will engage each group onto the project
* Any specific measures you will put in place to support them while they are on the project?
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| **2B:** **Please confirm that Annex B Outputs & Outcomes Template** has been fully completed with quarterly output forecasts for the duration of project delivery and aligned to the UKSPF Outputs & Outcomes. | Choose an item. |

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| **2C: Basis for output calculation**. Please outline the basis for calculating the forecast outputs for the project including supporting evidence. |
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| **2D: Basis for outcome calculation**. Please set out the quantifiable outcomes for the project and describe the basis on which they are calculated, and any assumptions made. Outcomes should be based on the UKSPF outcomes, and should relate to, but not duplicate, the project outputs.  |
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**Question 3: Governance and Capacity**

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| **3A: Governance and Management Structure: Set out below the governance and management structures in place to deliver the project.** Please include a project specific organogram (including delivery partners) showing the project structure. |
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| **3B: Project Delivery Team**: Provide details of the project delivery team, including roles, responsibilities, and previous experience of the team members in delivery of comparable projects. Please demonstrate that the delivery team has the competency, capability and capacity to deliver this project. Please append job descriptions where relevant. |
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| **3C: Delivery Partners.** Is there a formal agreement in place between the lead partner and all delivery partners? If yes, please append a copy to this applicationIf no, please explain whether a formal agreement will be put in place, and when. If there will not be a formal agreement, please explain the arrangements that will be put in place to manage the partnership and ensure effective delivery.  | Choose an item. |
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| **3D: Sign off****Please confirm the following:** |
| Has the received appropriate sign off / approval from your Board, Cabinetor equivalent within your organisation to enable the project to proceed?* If yes, please append a copy of the relevant approval (e.g. Board minutes, confirmation letter)
* If no, please explain the timescale and process for securing the relevant approvals
 | Choose an item. |
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| **3E: Risk Management****Please confirm the following:** |
| A project specific Risk Register is provided in Annex E in support of the application. | Choose an item. |
| Financial risks have been included in Annex E Risk Register. | Choose an item. |
| Additional risk management documentation has been provided (if appropriate). Ifyes, please specify. | Choose an item. |
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| Explain your project risk management arrangements and who overall is responsible for managing risks. |
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| Please outline your approach to managing financial risks such as unexpected escalation in costs or loss of funding. |
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| **3F: Statutory Regulations**: Are there any statutory regulations e.g., health and safety, DBS Clearances, or other safeguarding requirements to be considered?If yes, please provide a brief position update on each. | Choose an item. |
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| **3G: Payment in arrears:** UKSPF funding will be paid quarterly in arrears based on defrayed eligible expenditure. Please confirm the following: |
| Your organisation has the financial capacity to deliver the project on these terms. | [ ]  |
| Annex C – Latest Audited Financial Statement has been provided. | [ ]  |
| Annex D – Statement of Financial Standing has been completed. | [ ]  |
| If your organisation is not able to deliver the project on these terms, please explain why and what payment arrangement would be required. |
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| **3H: Performance Management:** Please summarise the systems you have in place to manage and report on performance (finance and outputs) internally and externally for UKSPF purposes? Please include details of:* How project expenditure will be identifiable within your finance system.
* The availability and accessibility of financial information for audit purposes.
* How claims will be compiled and authorised.
* How performance against spend or targets will be managed.
* How will the organisation be able to comply with UKSPF document retention requirements?
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| Please describe the systems you have in place to monitor the progression of project participants towards, or into work, and to measure the ‘softer’ impacts of the support provided e.g., increased confidence, motivation, aspiration etc.* If you do not currently have a system in place, please explain how you will establish a system and the timescale for doing so.
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| **3I: Procurement:** Set out your procurement plan covering all works, service contracts, and equipment, including proposed procurement methods, scoring and selection criteria. Confirm how these adhere to organisational and national procurement regulations. |
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| If any procurement processes for costs associated with this project have already started,can you confirm the following:* Procurement regulations were followed as set out above
* The costs associated with the procurement(s) will only be incurred if the project as a whole is approved.
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**Question 4: Record of Delivery**

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| **4A:** **Provide details of your most recent experience delivering ESF Funded employment support activity. Please include for each project**: * Project title, start and end date, delivery area, target beneficiary group, names of delivery partners, and total ESIF grant award.
* Details of performance against contracted targets e.g. engaging target participants, achievement of contracted outputs and outcomes, and financial performance.
* Details of your current delivery model, including the geographic area of delivery, and supportive infrastructure in the delivery area.
* How you worked in partnership with e.g. delivery partners; key stakeholders; other providers

If available, please append a copy of an executive summary of the independent evaluation of your project/s to demonstrate performance and effectiveness of delivery.  |
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**Question 5: Value for money**

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| **5A:** **Please describe how the project provides value for money**. Please include clear reference to what evidence and resources you have based your assessment on. Also include a unit cost for your project e.g., the cost per participant. Value for money should be based on both direct delivery impact and longer-term strategic value. As appropriate include comparable evidence against previous or similar schemes, and / or the value for money delivered by your most recent ESF employability projects (as described at Question 4 above). |
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**Question 6: Social Value**

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| **Question 6A:** **Please demonstrate how you will support further training opportunities for those who are furthest away from employment.** To support your response, please provide specific examples where applicable. Please shape your response around the social values themes as highlighted in Paragraph 22 of the guidance. * Theme one – helping local communities to manage and recover from COVID-19.
* Theme two – creating new business, new jobs and new skills.
* Theme three – reducing the disability employment gap.
* Theme five – improve health and wellbeing.
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1. **Other Supporting Information**

This section of the project application form allows applicants to provide additional supporting information that is specific to a given funding call or has not been covered in the previous sections that might strengthen the overall application.

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| **Additional information:** If there is any additional information not already set out that you feel is important to enable the full assessment and determination of your application, please set this out below. We would expect applicants to address the following questions in this section: * Demonstrate how you intend to progress participants towards and / or into work, including progression into training or complementary employability support to address a specific need, and what tool(s) will be used to monitor the individual’s progress
* Where applicable, please explain how your project will address the good practice findings of the call for evidence and the Building Better Opportunities Programmes described in sections 6 and 7 of the specification.
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| **Evaluation: Please confirm the following:** |
| a) | Will your organisation be undertaking an **internal** evaluation of project delivery and impact. If yes, please summarise below. | Choose an item. |
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| b) | Will your organisation be undertaking an **external** evaluation of project delivery and impact. If yes, please summarise below and include in the project expenditure | Choose an item. |
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| c) | An acknowledgement that this project, where requested to do so by North of Tyne Combined Authority and/or the UK Government, will be required to participate in Intervention, Place and Programme-level evaluations for UKSPF.  | [ ]  |
| Please summarise your overall approach to project evaluation and capturing the impact of your intervention, including outputs, outcomes, objectives, and case studies that show the impact and positive change achieved because of the support provided by UKSPF funding. |
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**NTCA Good Work Pledge**

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| Have you signed up to the NTCA Good Work Pledge?  | ​​Choose an item.​  |
| If yes, what date?  |   |
| Will you encourage organisations engaged in this project to sign up to the Good Work Pledge?  |   |
| If no:  |   |
| Would your organisation be interested in signing up to the Good Work Pledge?  | ​​Choose an item.​  |

**Communication Plan**

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| **Please confirm which of the following will apply to your project:** |
| Promoting job vacancies and opportunities created through the project | [ ]  |
| Promoting grant schemes funded through the project | [ ]  |
| Promoting open calls, procurement, or tender opportunities funded through the project | [ ]  |
| Creating a social media presence, please specify | ☐ |
|  |
| Creating a web presence, please specify | [ ]  |
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| Creating case studies or good news stories | [ ]  |
| Creating promotional or publicity materials | [ ]  |
| Creating newsletters or regular comms with stakeholders | [ ]  |
| Seeking coverage in the press and media regionally | [ ]  |
| Seeking coverage in the press and media nationally | [x]  |
| Other intended comms activities, please specify | [ ]  |
|  |
| **Please identify the lead point of contact for communications and publicity within your** **organisation for this project and their contact details.** |
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**Corporate Policies**

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| Through UKSPF, NTCA is looking to work with organisations who have thought through their corporate responsibilities. Please confirm the following: |
| The applicant organisation has an Equalities and Diversity Policy | Choose an item. |
| The applicant organisation has a Social Value Policy | Choose an item. |
| The applicant organisation has an Environmental & Sustainability Policy | Choose an item. |
| The applicant organisation has a Health and Safety Policy | Choose an item. |
| The applicant organisation has a Modern Slavery Policy | Choose an item. |
| The applicant organisation has a Data Protection Policy | Choose an item. |
| The applicant organisation has a Safeguarding Policy | Choose an item. |
| Please provide links below for all relevant policies. |
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**Evidence Checklist**

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| Please confirm that you have attached the following evidence required as part of this application  |
| Evidence/confirmation or match funding  | Choose an item. |
| Signed VAT Declaration  | Choose an item. |
| Organogram including details of delivery partners  | Choose an item. |
| Relevant job descriptions | Choose an item. |
| Evaluation Studies of previous employment support activity  | Choose an item. |
|  | Choose an item. |
|  | Choose an item. |
| Please provide details of any other relevant evidence to support this application  |
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**Annex A: Finance & Outputs**

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| **Separate Excel Document “UKSPF People and Skills Finance & Output Tables” has been completed**  | Choose an item. |

**Annex B: UK Subsidy Control**

**Please refer to separate document.**

**Annex C: Latest Audited Financial Statement**

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| **Your organisation’s latest audited financial statement has been uploaded to NE OPS.**  | Choose an item. |

**Annex D: Financial Standing Statement**

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| **STATEMENT OF GOOD STANDING** |
| **The applicant and any other partner organisation are required to complete the following statement of Good Standing, signed by a Financial Director, Partner or equivalent.** Where the applicant or partner organisation is unable to provide such confirmation, they may supply a qualified confirmation together with an explanation of any mitigating circumstances. Business Cases submitted along with any such qualification confirmations may be accepted or rejected at the discretion of the NTCA.We confirm that:* We have full power and authority to enter into an Agreement with the North of Tyne Combined Authority; and (require confirmation as to who the organisation will be entering into an agreement with if successful)
* Neither the organisation nor its directors are in, or in expectation of, a state of bankruptcy, insolvency, compulsory winding up, administration, receivership, composition with creditors or any analogous state or subject to relevant proceedings or, (if the respondent organisation is a registered Provider of Social Housing), placed in supervision by the Regulator; and
* Neither the organisation nor its directors have been convicted of a criminal offence relating to business or professional conduct, or are being investigated for, or subject to proceedings that are underway regarding the same, nor have the above committed an act grave misconduct in the course of business; and
* We have fulfilled our obligations relating to the payment of social security contributions and taxes; and
* In the last three (3) years, in aggregate, we have not paid, or been required to pay, liquidated damages or general damages under contract or tort, exceeding an amount equal to % of the turnover shown in our most recent audited consolidated accounts; and
* Our accounts have not been qualified by auditors in the last three (3) years or, if they have, details are attached, and that there have been no material post balance sheet events. This statement applies to the accounts for the years (please confirm the dates of the accounts to which this statement applies).
 |
| **Signed** |  |
| **Date** |  |
| **Name** |  |
| **Position** |  |

**Annex E: Risk Register**

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| --- | --- |
| **Date Last Updated** |  |
| **Completed by** |  |
| **Risk Identification** | **Likelihood of Occurrence & Impact** | **Response** |
| **Risk ID** | **Category** | **Risk Description** | **Consequence**  |  **Estimated Cost Impact**  | **Status** | **Probability (%)** |  **Risk Impact Level** | **Risk Owner** | **Strategy** | **Action(s) to Avoid or Reduce Risk** | **Predicted Risk Expiry Date**  | **Further Comments** |
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*See example below – delete this before submission.*

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| e.g. | Construction | Concrete fails the crush test | Columns need to be rebuilt |  £ 25,000  | Active | 40% | Low | J Bloggs | Mitigate | Ensure that pouring procedures are adhered to on site | Completion |   |

**Annex F: Sign Off**

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| **Please ensure the appropriate signatures are completed on the Project Application .****To be signed by the applicant prior to submission for appraisal.** |
| **Declaration**I declare that to the best of my knowledge and belief, the information given within the Project Application and in the supporting material is correct.I understand that acceptance of this Project Application does not in any way signify that the NTCA has agreed to invest in the project.I understand that should the project be approved a copy of the final, signed Project Application will be returned.I understand the requirements of the Freedom of Information Act 2000.I understand the implications of the subsidy control rules and the potential implications to our organisation if any breach of those regulations occurs.I am duly representative of the applicant organisation to sign off this business case and accept the offer letter. |
| **Signed** |  |
| **Name** |  |
| **Position / Title** |  |
| **Company / Organisation** |  |
| **Date** |  |